In re-Application of: GREGORY SPINGLE

For: ENERGY-ABSORBING PADDING WITH STAGED ELEMENTS

Attorney Docket No: 10541-1971

Express Mail" mailing label number: EV339726857US

Date of Deposit: April 20, 2004

UTILITY PATENT APPLICATION TRANSMITTAL

BRINKS HOFER GILSON &LIONE

390 U.S. PTO

Mail Stop PATENT APPLICATION Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450

	exandria, VA 22313-1450									22390	
and other papers:										s: 2	
1. Application including: Application Data Sheet. See 37 CFR § 1.76.											
☐ Title page											
 ✓ Specification, including claims and Abstract (11 pages) ✓ Drawings (3 sheet(s)) 										-	
☐ Appendices:											
☐ Declaration (2 pages; ☐ Executed ☐ Unexecuted)											
☐ Combined Declaration and Power of Attorney (2 pages: ☐ Executed ☑ Unexecuted)											
	2. 🔯 Information Disclosure Statement, including Form PTO-1449 (1 sheet), and any required copies										
٥. 4	3. ☐ Assignment Recordation Cover Sheet, with fee and attached assignment to: 4. ☐ Power of Attorney (pages: ☐ by inventor ☐ by Assignment do it is a #0 about)										
	 4. ☐ Power of Attorney (pages; ☐ by inventor ☐ by Assignee identified in item #3 above) 5. ☐ Nonpublication Request under 35 USC §122(b)(2)(B)(i) 										
6.	6. Other:										
	7. Return Postcard(s) 2.										
8.	8. Fee calculation:										
Applicant is a Small Entity.											
	Claims as Filed	Col. 1	Col. 2		Small Er	ntity		Not a Sma	I Entity		
	For	No. Filed	No. Extra		Rate	Fee	or	Rate	Fe	е	
	Basic Fee					\$ 385	or		\$	770	
	Total Claims	12-20	0		x\$9=	\$	or	x\$18=	\$		
	Independent Claims	1-3	0		x\$43=	\$	or	x\$86=	\$		
	Multiple Dependent Claims Present				+\$145=	\$	or	+\$290=	\$		
0	*If the difference in col. 1 is less	than zero, enter *	0" in col. 2.		Total	_\$	or	Total	\$	770	
9. Fee payment: A check in the amount of \$ to cover the filling fee is enclosed.											
Lo cover the limit lee is enclosed.											
Please charge my Deposit Account No. 23-1925 in the amount of \$770.00. A copy of this Transmittal is enclosed The Director is hereby authorized to charge payment of the following fees associated with this communication, or											
	credit any overpayme	nt, to Deposit	Account No.	06	-1500:	j iees assui	Jaleu	with this commun	ncation	ı, or	
	Any additional fili	ng fees requir	ed under 37	CF	R § 1.16.						
Any patent application processing fees under 37 CFR §1.17.											
10.	10. CORRESPONDENCE ADDRESS: please recognize the correspondence address for this application as the address associated with the following Customer Number:										
	associated with the lollowi										
					074-Visteor	/BHGL					
11.	PLEASE DIRECT all telep										
		Hugo A. Dele	vie (tel: (734	4) 3	02-6000; fax: (73	34) 994-63	331.				
Respectfully submitted.											
April 20, 2004					Mouselere						
Date				-	Hugo A. Delevie (Reg.No. 32,688) Cystomer No.29074 – Visteon/BHGL						